

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 4  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00473918	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Waterfront Strategies</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 21 / 2014</b>		
Mailing Address 3050 K Street, NW Ste 100			Amount <b>832483.00</b>		
City Washington	State DC	Zip Code 20007	Transaction ID : SE-6209		
Purpose of Expenditure TV Buy		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 15 / 2014</b>		
Name of Federal Candidate Thom Tillis		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b>		
Calendar Year-To-Date Per Election for Office Sought <b>2723693.92</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <b>The Pivot Group</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 21 / 2014</b>		
Mailing Address 1720 I St., NW Ste 550			Amount <b>54081.60</b>		
City Washington	State DC	Zip Code 20006	Transaction ID : SE-6210		
Purpose of Expenditure Mailhouse		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 15 / 2014</b>		
Name of Federal Candidate Thom Tillis		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b>		
Calendar Year-To-Date Per Election for Office Sought <b>2723693.92</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>886564.60</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Caroline Fines

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 21 / 2014**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 2 OF 4  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00473918       </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>The Strategy Group</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 21 / 2014</div> </div>	
Mailing Address 1603 Orrington Avenue Ste 1730		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">28673.52</div>	
City Evanston	State IL		
Purpose of Expenditure Mailhouse	Category/ Type	Transaction ID : <b>SE-6211</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> </div>	
Name of Federal Candidate Marilinda Garcia			
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>The Strategy Group</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 21 / 2014</div> </div>	
Mailing Address 1603 Orrington Avenue Ste 1730		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">27498.67</div>	
City Evanston	State IL		
Purpose of Expenditure Mailhouse	Category/ Type	Transaction ID : <b>SE-6212</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> </div>	
Name of Federal Candidate Frank Guinta			
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">56172.19</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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Caroline Fines

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Date

MM / DD / YYYY

10 / 21 / 2014

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 3 OF 4  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN VOTE!</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00473918	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Adelstein Liston</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 21 / 2014</b>		
Mailing Address 222 West Ontario Street Ste 600			Amount <b>200000.00</b>		
City Chicago	State IL	Zip Code 60654	Transaction ID : <b>SE-6213</b>		
Purpose of Expenditure TV Buy		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 17 / 2014</b>		
Name of Federal Candidate David Perdue		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <b>1589837.00</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <b>Adelstein Liston</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 21 / 2014</b>		
Mailing Address 222 West Ontario Street Ste 600			Amount <b>400000.00</b>		
City Chicago	State IL	Zip Code 60654	Transaction ID : <b>SE-6214</b>		
Purpose of Expenditure TV Buy		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 21 / 2014</b>		
Name of Federal Candidate David Perdue		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>GA</b>		
Calendar Year-To-Date Per Election for Office Sought <b>1589837.00</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>600000.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Caroline Fines

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Date

MM / DD / YYYY  
**10 / 21 / 2014**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 4 OF 4  
FOR SE OF FORM 24/48NAME OF COMMITTEE (In Full)  
**WOMEN VOTE!**

FEC IDENTIFICATION NUMBER ▼

**C** C00473918Check if ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed onM M M / D D D / Y Y Y Y Y Y  
/ / /Full Name of Payee  
**Adelstein Liston**Mailing Address 222 West Ontario Street  
Ste 600City State Zip Code  
Chicago IL 60654Purpose of Expenditure  
TV ProductionCategory/  
Type

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y  
10 21 2014

Amount

11650.00

Transaction ID : SE-6215

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y  
10 17 2014Name of Federal Candidate  
David Perdue☐ Support  
☒ OpposeOffice Sought: ☐ House District: \_\_\_\_\_  
☐ President ☒ Senate State: GACalendar Year-To-Date  
Per Election for Office Sought

1589837.00

Disbursement For: ☐ Primary ☒ General  
2014 ☐ Other (specify) ▶ \_\_\_\_\_

Full Name of Payee

Mailing Address

City State Zip Code

Purpose of Expenditure

Category/  
Type

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y

Amount

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y

Name of Federal Candidate

☐ Support  
☐ OpposeOffice Sought: ☐ House District: \_\_\_\_\_  
☐ President ☐ Senate State: \_\_\_\_\_Calendar Year-To-Date  
Per Election for Office SoughtDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▶ \_\_\_\_\_(a) **SUBTOTAL** of Itemized Independent Expenditures..... ▶

11650.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures ..... ▶(c) **TOTAL** Independent Expenditures..... ▶

1554386.79

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Caroline Fines

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
10 21 2014

Signature